Fill in this inf	ormation to identify your case:					x only as d	lirected in this form and	in Form
Debtor 1	Alexander S Vasileski			122	2A-1Supp:			
Debtor 2 (Spouse, if filing)	· -				■ 1. There	is no pres	umption of abuse	
United State	s Bankruptcy Court for the: Northern Dis		2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).					
Case number			_	•	•			
(if known)							does not apply now be y service but it could ap	
					☐ Check	if this is a	n amended filing	
<u>Official</u>	Form 122A - 1							
Chapte	r 7 Statement of Your (Curr	ent Month	ly Inc	ome			12/1
attach a separ case number (qualifying mili	e and accurate as possible. If two married pe ate sheet to this form. Include the line numbe if known). If you believe that you are exempte tary service, complete and file Statement of I Calculate Your Current Monthly Income	er to wh ed from Exempti	ch the additional in a presumption of ab	ormation a	pplies. On se you do n	the top of a ot have pri	ny additional pages, writ marily consumer debts o	e your name and r because of
	s your marital and filing status? Check o							
_	,	ne only						
	married. Fill out Column A, lines 2-11.	- :	hadh Oalassa Alas	d D. Conn	0.44			
_	ried and your spouse is filing with you.			•	2-11.			
	ried and your spouse is NOT filing with	-	•			d D. lines (0.44	
_	iving in the same household and are no	_	-					deelere under
p	iving separately or are legally separated benalty of perjury that you and your spouse ving apart for reasons that do not include of	are leg	ally separated und	er nonban	kruptcy lav	v that appli	es or that you and your	
101(10A). F the 6 month	average monthly income that you received from example, if you are filing on September 15, thens, add the income for all 6 months and divide the word the same rental property, put the income from	ne 6-mor e total b	nth period would be M y 6. Fill in the result. D	arch 1 throu	igh August 3 le any incon	31. If the amo	ount of your monthly incompore than once. For examp	ne varied during le, if both
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
_	ross wages, salary, tips, bonuses, overt	ime, aı	nd commissions (before all	\$	0.00	\$	
	deductions).	clude p	ayments from a spo	ouse if	·		*	
	B is filled in.		,···		\$	0.00	\$	
of you from an and roo	ounts from any source which are regula or your dependents, including child sup a unmarried partner, members of your hous ammates. Include regular contributions from . Do not include payments you listed on lin	oport. I sehold, n a spo	nclude regular cont your dependents, p	ributions arents,	\$	0.00	\$	
	ome from operating a business, profes		r farm		—			
	3		Debtor 1					
Gross r	eceipts (before all deductions)	\$	11,366.00	_				
Ordinar	ry and necessary operating expenses	- \$	7,780.00					
profess	nthly income from a business, ion, or farm	\$	3,586.00	Copy here ->	\$3	,586.00	\$	
6. Net inc	ome from rental and other real property	′	Debtor 1					
Cross	receipts (hefere all deductions)		\$ 0.00					
	receipts (before all deductions) ry and necessary operating expenses		-\$ 0.00					
	nthly income from rental or other real prop	erty	\$ 0.00 Cor	y here ->	\$	0.00	\$	
	t. dividends. and rovalties	.,			\$	0.00	\$	

Official Form 122A-1

Case 16-28563 Doc 8 Filed 09/20/16 Entered 09/20/16 14:54:37 Desc Main Document Page 2 of 2

Debtor 1 Alexander S Vasileski Case number (if known) 16-28563

				Column A Debtor 1		Column B Debtor 2 or non-filing spouse		
	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benef	it under					
	For you \$	0.	00					
•	For your spouse \$							
	Pension or retirement income. Do not include any ambenefit under the Social Security Act.			\$	0.00	\$		
	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hundomestic terrorism. If necessary, list other sources on a total below.	Security Act or paymen manity, or international	ts or	•				
	·			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column		\$	3,586.00	<u> </u>		= \$3	,586.00
							Total curi	rent monthly
Part	2: Determine Whether the Means Test Applies to	o You					income	,
12	Calculate your current monthly income for the year.	Follow these stens:						
	12a. Copy your total current monthly income from line 1	•		C	opy line 11 l	horo->	\$ 3	596 00
	12a. Copy your total current monthly income from line 1	11			ору ше тт	11616->	Ψ <u> </u>	3,586.00
	Multiply by 12 (the number of months in a year)						x 12	<u> </u>
	12b. The result is your annual income for this part of the	e form				12b.	\$43	3,032.00
13.	Calculate the median family income that applies to	you. Follow these step	os:					
	Fill in the state in which you live.	IL						
	Fill in the number of people in your household.	5						
	Fill in the median family income for your state and size of household.							,321.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link spruptcy clerk's office.	pecified	in the sep	arate instruc	tions		
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	n the top of page 1, ch	eck box	1, There	is no presum	nption of abuse).	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pr	esumption	of abuse is	determined by	Form 122.	A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information or	n this sta	atement a	nd in any atta	achments is tru	e and corr	rect.
	X /s/ Alexander S Vasileski							
	Alexander S Vasileski Signature of Debtor 1							
	Date September 19, 2016 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and fi	ile it with this form.						